



8622 West Catalpa Chicago, IL 60656
 Tel. 773.714.0646 Fax 773.714.9361
 www.brickton.org/summer

A \$250 non-refundable deposit must accompany this form.
 Applications received after May 1st will incur a \$100 late registration fee.

FOR OFFICE USE ONLY:

Fee Rec'd by _____ Date _____ Ck# _____

APPLICATION FOR SUMMER ENROLLMENT

Student Information

Name _____ Date of Birth _____
First Middle Last
 Name commonly used _____ Sex _____ Home tel. # _____
 Address _____
Street City State Zip Code

Parent/Guardian Information

Parent Name _____
 Address _____
Street City State Zip
 Home Phone _____
 Occupation _____
 Employer _____
 Emp. Address _____
Street City State Zip
 Business Phone _____
 Cell Phone _____
 Email Address _____

Parent Name _____
 Address _____
Street City State Zip
 Home Phone _____
 Occupation _____
 Employer _____
 Emp. Address _____
Street City State Zip
 Business Phone _____
 Cell Phone _____
 Email Address _____

Marital Status _____

Parents or guardians listed above have permission to pick up the student unless otherwise indicated. If a divorced parent has restricted contact with the student, you must supply the school with a certified copy of the divorce decree as well as any other legal documents applicable to the situation.

Emergency Contact and Pick up List (Complete this section only if the information is different from the school year for students already enrolled at Brickton. All new students must complete this section.)

| | | | | |
|-------------------------------|--------------------|----------------------------|---|---|
| Name _____ | Day Tel. # _____ | Contact in Emergency? | Y | N |
| Relationship to Student _____ | Other Tel. # _____ | Pick up student at school? | Y | N |
| Name _____ | Day Tel. # _____ | Contact in Emergency? | Y | N |
| Relationship to Student _____ | Other Tel. # _____ | Pick up student at school? | Y | N |
| Name _____ | Day Tel. # _____ | Contact in Emergency? | Y | N |
| Relationship to Student _____ | Other Tel. # _____ | Pick up student at school? | Y | N |

T-Shirts (\$10 per shirt, required for field trips)

Milk (CH and up, Optional)

6-8 10-12 14-16 Adult M Adult L

_____ \$2.50 per week _____ \$25 for the whole summer

Medical/Physician Information

Any student with a severe allergy or special medical consideration is required to wear a medical alert bracelet.

List student's known allergies or medical conditions

List medications currently taken _____

List student's serious illnesses or accidents _____

Name of student's doctor _____ Tel. # _____

EMERGENCY FIRST AID – Having full confidence that every reasonable precaution will be taken to ensure the safety and well-being of my child during summer camp (held between the hours of 6:45 a.m. – 6:00 p.m., from June 10, through August 14, 2009), I agree to my child's participation and waive all claims against all the employees and officers of Brickton Montessori School. In the event of a serious illness or accident, I give my permission for school personnel to administer emergency first aid and to contact the Chicago Fire Department Paramedics. I give permission for treatment of my child at the nearest hospital and agree to be responsible for the cost of any such medical treatment.

_____ I authorize Brickton Montessori School to apply sunscreen (SPF 30) to my child as needed. If I would like a specific type of sunscreen, I will provide it by the first day of camp.

_____ I authorize Brickton Montessori School to apply insect repellent (that I will supply) to my child as needed.

_____ **FOR CHILDREN 4 YEARS AND OLDER:** My child has permission to go on all school sponsored field trips. I understand transportation may be by van, bus, parent/faculty driver, or on foot.

_____ I give permission for my child to appear in pictures for publicity purposes.

Parent/ Guardian Signature _____ Date _____

Programs Applied For

TODDLER OR CHILDREN'S HOUSE

Level (circle one): Toddler Children's House

How many days? Which program?

_____ 5 days per week _____ Half Day

_____ Partial week: _____ Core Day

_____ M T W Th F _____ Full Day

Which weeks?

_____ Full Summer Camp Program

OR

By the week:

_____ Week 1 (June 10 – 12, 3 days)

_____ Week 2 (June 15 – 19, 5 days)

_____ Week 3 (June 22 – 26, 5 days)

_____ Week 4 (June 29 – July 2, 4 days) *Closed July 3*

_____ Week 5 (July 7 – 10, 4 days) *Closed July 6*

_____ Week 6 (July 13 – 17, 5 days)

_____ Week 7 (July 20 – 24, 5 days)

_____ Week 8 (July 27 – 31, 5 days)

_____ Week 9 (August 3 – 7, 5 days)

_____ Week 10 (August 10 – 14, 5 days)

ELEMENTARY I OR ELEMENTARY II

Level (circle one): Elementary I Elementary II

Which program?

_____ Core Day

_____ Full Day

Which weeks?

_____ Full Summer Camp Program

OR

By the session:

_____ Session 1 (June 10 – June 19, 8 days)

_____ Session 2 (June 22 – July 2, 9 days) *Closed July 3*

_____ Session 3 (July 7 – 17, 9 days) *Closed July 6*

_____ Session 4 (July 20 – July 31, 10 days)

_____ Session 5 (August 3 – 14, 10 days)

Brickton Montessori School is a non-sectarian, non-profit corporation. Brickton Montessori School does not discriminate in admission or placement on the basis of race, sex, color, creed, national or ethnic origin.